Stem Cell Commentary: Spinning the Terms

Part of the struggle in the stem cell debate is the definition of terms. The media regularly uses the term *embryo* to refer to what is necessarily destroyed to obtain embryonic stem cells. The more specific term is *blastocyst*. The blastocyst (see picture) forms after about 5-7 days following fertilization and ends at about 14 days when further differentiation begins.

Medical thriller author Robin Cook in his latest book, *Seizure*, has one of his characters, a medical researcher Dr. Daniel Lowell, testify before Congress that "Blastocysts have a potential to form a viable embryo, but only if implanted in a uterus. In therapeutic cloning, they are never allowed to form embryos… Embryos are not involved in therapeutic cloning." (p. 32) The clear implication is that blastocysts are not embryos. This sounds extremely disingenuous to me.

Cook further clarifies his personal opinion in the epilogue where he states, "Senator Butler [a predictably hypocritical, pompous pro-life senator—my comment], like other opponents of stem-cell and therapeutic cloning research, suggests that the procedure requires the dismemberment of embryos. As Daniel points out to no avail, this is false. The cloned stem-cells in therapeutic cloning are harvested from the blastocyst stage

well before any embryo forms. The fact is that in therapeutic cloning, an embryo is never allowed to form and nothing is ever implanted into a uterus." (p. 428) So if there are no embryos, there are no humans and there is no ethical debate. Cook is playing a semantic game. The character Daniel in the novel admits as much but says it is important semantics.

So I checked Scott Gilbert's fifth edition of *Developmental Biology* (Sinauer Assoc. Inc.), 1997. On page three Gilbert says, "The study of animal development has traditionally been called embryology, referring to the fact that between fertilization and birth the developing organism is known as an embryo." By this definition, Cook is far off base as I suspected.

But then I checked to see if Gilbert had a newer edition. Sure enough, I found one on Amazon.com. The year is not stated but I suspect it is at least 2002-2003. Not surprisingly, I suppose, the same definition of embryology is stated differently (some pages are available for viewing): "The study of animal development has traditionally been called embryology, from that phase of organisms that exists between fertilization and birth." (p. 4) Note that the word "embryo" is omitted this time, yet the word "embryology" clearly means the study of embryos. So Gilbert tries to backpedal from the word embryo yet inadvertently defines embryo anyway by simply trying to define embryology at all. I wonder if Gilbert and Cook know each other. <smile> Note also that human embryonic stem cells were first harvested successfully from embryos left over in fertility clinics by researchers from the University of Wisconsin in 1998, one year after Gilbert's 5th edition.

Even biologists are now learning how to manipulate the language to define things however it suits them politically.

Stem Cells and the Controversy Over Therapeutic Cloning

Dr. Ray Bohlin explains stem cells and where they come from, insisting the potential of stem cell therapy must be weighed against the personhood of the embryo.

What Are Stem Cells and Why Are They Important?

President Bush recently decided to allow the use of federal funds to research the therapeutic properties of privately produced human embryonic stem cells (ES). President Bush clearly maintained the prohibited use of federal monies to produce human ES cells, since the procedure requires the destruction of the embryo to obtain them, which is currently prohibited by federal law. To fully understand the ramifications of this decision, I will discuss the nature of stem cells and their potential to treat disease.

Most of the more than one trillion cells that form the tissues of our bodies possess a limited potential to reproduce. If you remove some live human skin cells, they may divide in culture (laboratory conditions) five or six times and then die. Special cells in the underlying skin layers are what produce new skin cells. These cells' sole function is to churn out replacement cells. These are known as stem cells. Most tissues of our bodies possess stem cells that can reproduce the different cells required in that tissue. Bone marrow stem cells can produce the many different cells of the blood. They are called stem cells, since they are seen as the stem of a

plant that produces all the “branches and leaves” of that tissue.

What I’ve described is referred to as adult stem cells. There is no controversy revolving around the use of human adult stem cells in research, since they can be retrieved from the individual requiring the therapy. The promise of adult stem cells has increased dramatically in recent years. Stem cells have even been found in tissues previously thought to be devoid of them, such as neural tissue. It has recently been shown that certain types of stem cells are not limited to producing cells for the tissue in which they reside. For instance, bone marrow stem cells can produce skeletal muscle, neural, cardiac muscle, and liver cells. Bone marrow stem cells can even migrate to these tissues via the circulatory system in response to tissue damage and begin producing cells of the appropriate tissue type.{1}

In addition to the advantages of previously unknown adult stem cells and their unexpected ability to produce numerous types of cells, adult stem cells carry the added potential of not causing any immune complications. Conceivably adult stem cells could be harvested from the individual needing the therapy, grown in culture to increase their number, and then be reinserted back into the same individual. This means the treatment could be carried out with the patient’s own cells, virtually eliminating any rejection problems. Adult stem cells may also be easier to control since they already possess the ability to produce the needed cells simply by being placed in the vicinity of the damaged tissue.

Human Embryonic Stem Cells

The advances in adult stem cell research has only come about in the last three years. Traditionally it was thought that ES cells carried the greatest potential to treat wide-ranging degenerative diseases such as diabetes, Parkinson’s, multiple sclerosis, spinal chord injuries, and Alzheimer’s. Since ES

cells derive from the inner cell mass of the early embryo (5-7 day old blastocyst), they are capable of forming all the tissues of the body. Therefore, researchers have long felt that human ES cells hold the greatest potential for treatment of degenerative diseases.

While the potential has always existed, the problem has been that in order to obtain these human ES cells, the embryo is destroyed during the harvesting procedure. In addition, while ES cells had been obtained and grown successfully in culture from several mammals, including mice, efforts at producing ES cells from other mammals had failed. Nobody was sure human ES cells could even be successfully produced until November 1998 when James Thomson from the University of Wisconsin announced the establishment of five independent human ES cell lines.{2} (A cell line is a population of cells grown from a single cell that has been manipulated to continue growing indefinitely in culture, while maintaining its cellular integrity.) Geron Corporation funded Thomson's work, so it did not violate the federal ban on government funds being used for such purposes. But his announcement immediately opened up a desire by federally funded researchers to use his already established human ES cells.

But there are potential problems and uncertainties in both adult and ES cells. While the ethical difficulties are non-existent for adult stem cells, they may not prove as helpful as ES cells. ES cells have the potential for universal application, but this may not be realized. As stated earlier, establishing ES cell lines requires destruction of human embryos. An ethical quagmire is unavoidable.

Whereas adult stem cells can be coaxed into producing the needed cells by proximity to the right tissue, the cues needed to get ES cells to produce the desired cells is not known yet. Some in the biotech industry estimate that we may be twenty years away from developing commercially available treatments using ES cells.{3} Clinical trials using adult stem cells in

humans are already under way.

In August of 2000, NIH announced new guidelines allowing federally funded researchers access to human ES cell lines produced through private funding. The Clinton administration hailed the new guidelines, but Congressional pro-life advocates vowed a legal confrontation claiming the new guidelines were illegal.

The Options for President Bush

This was the situation facing President Bush when he took office. The pressure to open up federally funded human ES cell research mounted from patient advocacy groups for diabetes, spinal chord injuries, Parkinson's disease, and Alzheimer's. Additional pressure to reject federal funding of human ES cell research came from traditional pro-life groups including National Right to Life and the Catholic Church, with personal lobbying from Pope John Paul II.

One option open to the President and advocated by the scientific community was to free up all research avenues to fully explore all possibilities from ES cells regardless of their source. This would include federal funding for ES cells derived from embryos specifically created for this purpose. Few openly advocated this, but the oldest fertility clinic in the U. S. (in Virginia) announced recently that they were doing just that. Few within the government or research communities offered much protest.

Another option on the opposite end of the spectrum would have been to not only prohibit all federal funding on the creation and use of ES cells, but to also propose a law which would effectively ban all such research in the U. S., regardless of the funding source. Because of my view of the sanctity of human life from the moment of conception, this would be the ideal solution. However, this is not practical, since Roe v. Wade still is the rule of law in the U. S. This means that by

law, a mother can choose to do with her embryo whatever she wants. If she wishes to end its life by abortion or by donation for research as a source of ES cells, she is free to do so.

A third option open to the President, and the one advocated by most in the research community, was to open up federal funding for the use and creation of ES cells derived from leftover embryos destined for destruction at fertility clinics. Some have estimated that there are over 100,000 such embryos in frozen storage in the U. S. alone. The intent is to find some use or ascribe some value to these leftover embryos. It is common practice in fertility clinics to fertilize 8-9 eggs at a time to hedge your bet against failure and to minimize expenses. As many as half of these embryos are left over after a successful pregnancy is achieved. These embryos are either left in frozen storage or destroyed at the request of the parents. So why not use them for research?

Other Options Available to President Bush

Advocates for ES cell research argue that if the embryos left over from infertility clinics are going to be wasted anyway, why not put them to some use and allow their lives to be spent helping to save someone else? The first mistake was to generate extra embryos without a clear intent to use all of them or give them up for adoption. Second, these tiny embryos are already of infinite value to God. We’re not going to redeem them by killing them for research. Each embryo is a unique human being with the full potential to develop into an adult. Each of us is a former embryo. We are not former sperm cells or egg cells.

Third, this is essentially using the dangerous ethical maxim that “the end justifies the means.” A noble end or purpose does not justify the crime. Just because a bank robber wants to donate all the money to charity doesn’t make the bank heist right. Nazi researchers gained valuable information through

their many life- threatening experiments on Jews and other “undesirables” in the concentration camps of WWII. But most would not dignify these experiments by examining and using their findings.

A fourth option that I prefer is to close off all federal funding for human ES cell research. This would allow private dollars to fund human ES cell research, and federal dollars can be used to vigorously pursue the ethically preferable alternative offered by adult stem cells, which have shown great promise of late.

This would undoubtedly slow the progress on human ES cells and some researchers. Because of their dependence on federal research grants, they would not be able to pursue this line of research. But nowhere is it written that scientists have a right to pursue whatever research goals they conceive as long as they see a benefit to it. For years the U. S. Congress passed the Hyde Amendment that prohibited the use of federal funds for abortions, even though abortions were legal. The creation of human ES cells may be legal in the U. S. but that doesn’t mean researchers have a right to government monies to do so.

The President did decide to allow the use of federal funds only for research involving the 60 already existing human ES cell lines. The President expressly prohibited the use of government dollars to create new ES cell lines, even from leftover embryos. Researchers and patient advocates are unhappy, because this will limit the available research if these already existing ES cell lines don’t work out. Pro-life groups are unhappy, because the decision implicitly approves of the destruction of the embryos used to create these ES cell lines.

Stem Cells in the News Since the

President’s Decision

When the President decided to open up federal funding for research on already existing human embryonic stem cell lines, just about everybody was unhappy. Researchers and patient advocates were unhappy, because this will limit the available research if these already existing cell lines don’t work out. The supply just might not meet the research demand. Pro-life groups were unhappy, including myself, because the decision implicitly approves of the destruction of the embryos used to create these ES cell lines. They will cost researchers at least $5,000 per cell line. Therefore, to purchase them for research indirectly supports their creation. Since both sides are unhappy, it was probably a good political decision even if it was not the right decision.

We certainly haven’t heard the end of this debate. Members of Congress are already positioning to strengthen or weaken the ban by law. Either way, the policy of the United States has clearly stated that innocent human life can be sacrificed without its consent, if the common good is deemed significant enough to warrant its destruction. I fully believe that this is a dangerous precedent that we will come to regret, if not now, then decades into the future. The long predicted ethical slippery slope from the abortion decision continues to threaten and gobble up the weak, the voiceless, and the defenseless of our society.

What has alarmed me the most since the President’s decision is the full assault in the media by scientists to gain even greater access to more human embryonic stem cells, regardless of how they are produced. The ethical question virtually dropped from the radar screen as scientists debated whether the existing cell lines would be enough.

This attitude is reflected in the increasing attention given to potential benefits, while downplaying the setbacks and problems. The scientists speaking through the media emphasize

the new therapies as if they are only a few years down the road. The more likely scenario is that they are decades away. Your grandmother isn't likely to be helped by this research.

Virtually nobody knows about the failure of human fetal cells to reverse the effects of Parkinson's disease in adults. About 15 percent of patients from a recent trial were left with uncontrollable writhing and jerking movements that appear irreversible. The others in the study weren't helped at all.{4} Chinese scientists implanted human embryonic stem cells into a suffering Parkinson's patient's brain only to have them transform into a powerful tumor that eventually killed him.{5}

Research with mouse embryonic stem cells has not faired much better. Scientists from the University of Wisconsin recently announced success in tricking human embryonic stem cells into forming blood cell-producing stem cells. Enthusiastic claims of future therapies overshadowed the reality that the same procedure has been successful in mice, except that when these cells are transplanted into mice, nothing happens. They don't start producing blood cells and nobody knows why.{6}

This debate will continue. Stay tuned.

Notes

1. H. M. Blau, T. R. Brazelton, and J. M. Weiman, 2001, "The evolving concept of a stem cell:entity or function," *Cell* Vol. 105 (June 29, 2001), p. 829-841.

2. James A. Thomson, et al., 1998, "Embryonic stem cell lines derived from human blastocysts." *Science* Vol. 282 (November 6, 1998): 1145-1147. Also in same issue see Perspective article by John Gearhart, "New potential for human embryonic stem cells," p. 1061-1062.

3. David Hamilton and Antonio Regaldo, 2001, "Biotech industry – unfettered, but possibly unfilfulled," *Wall Street Journal*,

August 13, 2001, p. B1.

4. Tracy Maddox, 2001, Fetal tissue fails to cure Parkinson's patients. www.pointofview.net/ar_fetal.html. 3/21/01.

5. Charles Krauthammer, 2001, "The great stem cell hoax," *The Weekly Standard*, August 20/August 27, 2001, p. 12.

6. Nicholas Wade, 2001, "Blood cells from stem cells," *Dallas Morning News,* September 4, 2001, p. A1. The article was a *New York Times* News Service report.